

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Facility Information

Facility Name: SYLVAN CROSSINGS BELLEVILLE (0009537)

Address: 2 HERITAGE LA, BELLEVILLE, WI 53508

License Status: REGULAR

Licensed/Certified/Registered 09/01/2002

Regional Office: SOUTHERN REGION (MADISON), (608) 243-2370

Survey History

Survey ID: 0094371 **End Date:** 03/28/2005 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT/SELF REPORT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Complaint History

Date Complaint Received: 01/12/2005

Date Investigation Completed: 03/29/2005

Subject Area(s)

ABUSE
STAFF TRAINING AND PROFICIENCY
STAFF ADEQUACY

Result

NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

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